Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of Illinois	
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13
	a onspecto

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
OCT 12 2016

JEFFREY P. ALLSTEADT, CLERK an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

known). Answer every question		
art 1: Identify Yourself	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name		
Write the name that is on your	TATYANA	
government-issued picture identification (for example,	First name	First name
your driver's license or passport).	Middle name	Middle name
• • •	HOPKINS	
Bring your picture identification to your meeting	Last name	Last name
with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		ентериодиненто о по вые напри постанува при постанува по постанува по постанува по постанува по постанува по по First name
have used in the last 8 years	First name	
Include your married or maiden names.	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social Security	$xxx - xx - \underline{7} \underline{6} \underline{5} \underline{7}$	xxx - xx
number or federal	OR	OR
Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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Debtor 1 A YANA H	OPKINS Name Last Name	Case number (if innown)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
. Where you live		If Debtor 2 lives at a different address:
	3333 W MADISON	
	Number Street	Number Street
	CHICAGO IL 60624	
	City State ZIP Code	City State ZIP Code
	COOK	
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
Why you are choosing this district to file for	Check one:	Check one:
bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1	t	٦r	Deh
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TATY	ANA HOPK	INS
First Mana	Beidelin Almana	1

P	arti2: Tell the Court Abo	ut Your	Bankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you	Check of the Check	one. (For a brief d kruptcy (Form 20	lescription of each, se 10)). Also, go to the to	e <i>Not</i> p of p	ice Required by 1 page 1 and check	1 U.S.C. § 342(b) for Individuals Filing the appropriate box.	
	are choosing to file under		apter 7				., ,	
	ariagi	☐ Cha	apter 11					
		☐ Cha	apter 12					
		☑ Cha	apter 13					
8.	How you will pay the fee	loca you sub	☐ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
		2 1 I ne App	ed to pay the f	ee in installments. viduals to Pav The I	If yo	ou choose this o	ption, sign and attach the ents (Official Form 103A).	
		By I less pay	aw, a judge may than 150% of t the fee in instal	y, but is not required the official poverty til	to, ne th se th	waive your fee, at applies to you nis option, you m	tion only if you are filing for Chapter 7 and may do so only if your income is or family size and you are unable to nust fill out the Application to Have the with your petition.	
9.	Have you filed for	☑ No						
	bankruptcy within the last 8 years?	Yes.	District	\	Vhen		Case number	
			District	,	Vhen	MM / DD / YYYY	Case number	
					*******	MM / DD / YYYY	Case fluitiber	
			District		Vhen	MM / DD / YYYY	Case number	
10.	Are any bankruptcy	☑ No						
	cases pending or being filed by a spouse who is	☐ Yes.	Debtor				Relationship to you	
	not filing this case with you, or by a business partner, or by an affiliate?				/hen		Case number, if known	
	annac, :		Debtor				Relationship to you	
							Case number, if known	
	Do you rent your residence?	□ No.	Has your landlor residence? No. Go to line	e 12.			and do you want to stay in your Against You (Form 101A) and file it with	

this bankruptcy petition.

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Debtor 1 TATYANA HO	<u> </u>	-	Control de la constante de la	Case nu	mber (# known)		
rest marre Maddle Na	wec	Last Name					
Report About Any	Busines	ses You Own as a So	ole Propriet	or			
12. Are you a sole proprietor	[7] No	Go to Part 4.					
of any full- or part-time							
business?	∟ Yes	. Name and location of be	usiness				
A sole proprietorship is a business you operate as an		·			······		
individual, and is not a separate legal entity such as		Name of business, if any					
a corporation, partnership, or		U					
LLC.		Number Street	4				
If you have more than one sole proprietorship, use a						***************************************	
separate sheet and attach it to this petition.							
to this petition.		City			State ZIF	Code	
		Check the appropriate b	ov to decorib	a vour hueinaee:			
		Health Care Busines			11/27Δ\\		
		☐ Single Asset Real E		_			
		☐ Stockbroker (as defi	•	_	, 101(31 <i>0))</i>		
		☐ Commodity Broker (3))		
		☐ None of the above		77 0.0.0.3 70.70	-11		
Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	most reany of the No.	appropriate deadlines. If cent balance sheet, state hese documents do not ell am not filing under Chapte the Bankruptcy Code. I am filing under Chapte the Bankruptcy Code. Bankruptcy Code.	ment of opera exist, follow the apter 11.	ations, cash-flow s e procedure in 11 I NOT a small busi	itatement, and t U.S.C. § 1116(iness debtor ac	federal inc (1)(B). coording to	come tax return or if
		Any Hazardous Prop	erty or Any	Property That	t Needs Imm	ediate A	ttention
i. Do you own or have any property that poses or is	☑ No						
alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any	Yes.	What is the hazard?					
property that needs immediate attention?		If immediate attention is	s needed, wh	y is it needed?			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?							
		Where is the property?	Number	Street			
			NUMBEL	ou ve t			
			City			State	ZIP Code

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Debtor 1

TATYANA HOPKINS
Fisi Name Middle Name Last Name

Case number (if known)	
------------------------	--

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debtor	1	
-------	--------	---	--

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Ų	I am not required to receive a briefing about
	credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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De	btor 1 TATYANA HC	OPKINS ne Last Name	Case number (i	f kaswa)	
P	art 6: Answer These Que	stions for Reporting Purposes			
16.	What kind of debts do		consumer debts? Consumer drimarily for a personal, family, or he	lebts are defined in 11 U.S.C. § 101(8) pusehold purpose."	
	you have?	No. Go to line 16b. Yes. Go to line 17.			
			business debts? Business deb tment or through the operation of t	ts are debts that you incurred to obtain he business or investment.	
		No. Go to line 16c. Yes. Go to line 17.			
		16c. State the type of debts you ow	e that are not consumer debts or t	ousiness debts.	
17.	Are you filing under Chapter 7?	✓ No. I am not filing under Chapt	er 7. Go to line 18.	Э Этом, о чента пречи до ден и ченто не производително на пределение на предоставления до надажения выдачающим	
	Do you estimate that after any exempt property is excluded and	Yes. I am filing under Chapter 7 administrative expenses at	 Do you estimate that after any ex re paid that funds will be available 	rempt property is excluded and to distribute to unsecured creditors?	
-50074-5	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes			
18.	How many creditors do you estimate that you	☑ 1-49 □ 50-99	1,000-5,000 5,001-10,000	25,001-50,000 50,001-100,000	
	we?	☐ 100-199 ☐ 200-999	10,001-25,000	☐ More than 100,000	
19.	How much do you estimate your assets to	☑ \$0-\$50,000 □ \$50,001-\$100,000	\$1,000,001-\$10 million \$10,000,001-\$50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion	
	be worth?	\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 million	\$10,000,000,001-\$50 billion More than \$50 billion	
20.	How much do you estimate your liabilities	☑ \$0-\$50,000 □ \$50,001-\$100,000	\$1,000,001-\$10 million \$10,000,001-\$50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion	
	to be?	□ \$100,001-\$500,000 □ \$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion	
Pa	rt77: Sign Below				
Fo	r you	I have examined this petition, and I correct.	declare under penalty of perjury th	at the information provided is true and	
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.			
		If no attorney represents me and I d this document, I have obtained and		e who is not an attorney to help me fill out .C. § 342(b).	
		I request relief in accordance with the	•	,	
		I understand making a false statement with a bankruptcy case can result in 18 U.S.C. §§ 152, 1341, 1519, and	fines up to \$250,000, or imprisonr	ng money or property by fraud in connection ment for up to 20 years, or both.	
		* Datyon Hop	Vino ×	um of Dobbler 2	

Executed on

Executed on

MM / DD / YYYY

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Potor 1 TATYANA HC First Name Middle Nam		Case number (# known)	
or your attorney, if you are presented by one	I, the attorney for the debtor(s) named in thi to proceed under Chapter 7, 11, 12, or 13 o available under each chapter for which the the notice required by 11 U.S.C. § 342(b) are	s petition, declare that I have info f title 11, United States Code, an person is eligible. I also certify the	ormed the debtor(s) about eligibilit nd have explained the relief nat I have delivered to the debtor(s
you are not represented an attorney, you do not	knowledge after an inquiry that the informat		
ed to file this page.	*	Date	
	Signature of Aftorney for Debtor		MM / DD /YYYY
	Printed name		
	Firm name		
	Number Street		
	City	State	ZIP Code
	Contact phone	Email address	
	•		Value of the second sec
	Bar number	State	-

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Debtor	1

TATY	'ANA	HOF	KINS
First Name	Mid	dia Name	

Middle Name Last Name

Case number	(if known)

For you if you are filing this bankruptcy without an attorney

if you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious act consequences? No Yes	ion with long-te	erm financial and legal				
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or impriso No Yes	and that if you ned?	r bankruptcy forms are				
☑ No ☐ Yes. Name of Person						
By signing here, I acknowledge that I understand the ris have read and understood this notice, and I am aware t attorney may cause me to lose my rights or property if I	hat filing a ban	kruptcy case without an				
· Oatyma Horlino *	•					
Signature of Debtor 1	Signature of De	btor 2				
Date 10 09 2010 MM/ DD / YYYY	Date	MM / DD /YYYY				
Contact phone 3 2 87 1 190	Contact phone	4-14-14-14-14-14-14-14-14-14-14-14-14-14				
Cell phone	Cell phone					
Email address + Atyanah opkins 936	Email address	44				

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Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	schedules after you file
Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$
1b. Copy line 62, Total personal property, from Schedule A/B	\$500.00
1c. Copy line 63, Total of all property on Schedule A/B	\$500.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 12,528.00
Your total liabilities	\$12,528.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,800.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,500.00
Talan salah banda dan kecamatan dan salah bandaran kecamatan bermalah bandaran bermalah bermalah bermilik salah	

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De	btor 1 TATYANA HOPKINS Ca	se number (if known)
	First Name Middle Name Last Name	
R	Answer These Questions for Administrative and Statistical Records	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?	
	 No. You have nothing to report on this part of the form. Check this box and submit this form. ✓ Yes 	orm to the court with your other schedules.
7 .	What kind of debt do you have?	ta. Menerakangan 1990 darah dekembangan darah kendadah di Kalanda darah
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpo	individual primarily for a personal, uses. 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	t of the form. Check this box and submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come from Official s1,800.00
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	
		Total claim
	From Part 4 on Schedule E/F, copy the following:	
	9a. Domestic support obligations (Copy line 6a.)	\$
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	s0.00
	9d. Student loans. (Copy line 6f.)	\$0.00
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$0.00
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
	9g. Total. Add lines 9a through 9f.	\$0.00

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Fill in	this information to identify your case and th	is filing;		
n	. TATYANA HOPKINS			
Debtor	First Name Middle Name	Last Name		
Debtor 2	2 if filing) First Name Middle Name	Last Name		
	-	•		
United 8	States Bankruptcy Court for the: Northern District o	f Minois		
Case nu	ımber		r	1 0 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
			Į.	Check if this is an amended filing
~ cc				difference filling
Ome	cial Form 106A/B			
Sc	hedule A/B: Propert	ty		12/15
respor write y Parrel	nsible for supplying correct information. If no cour name and case number (if known). Ans Describe Each Residence, Building.	lete and accurate as possible. If two married people nore space is needed, attach a separate sheet to the wer every question. Land, or Other Real Estate You Own or Ha est in any residence, building, land, or similar prop	nis form. On the top of a	om are equally any additional pages,
Ø 1	No. Go to Part 2.		-	
	es. Where is the property?			
		What is the property? Check all that apply.	Do not deduct secured cl	aims or exemptions. Put
1.1.		Single-family home	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
1.1.	Street address, if available, or other description	Duplex or multi-unit building	Creditors who have Clair	ns secured by r-roperty.
		Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	410-14-44-44-44-44-44-44-44-44-44-44-44-44-	- Land	entire property:	pordon you own:
		☐ Investment property	Φ	2
	City State ZIP Code	Timeshare	Describe the nature	of your ownership
	21, 0000	Other	interest (such as fee the entireties, or a life	simple, tenancy by e estate), if known.
		Who has an interest in the property? Check one.		,,
		Debtor 1 only		
	County	Debtor 2 only		
		Debtor 1 and Debtor 2 only	Check if this is co (see instructions)	mmunity property
		At least one of the debtors and another	,	
		Other information you wish to add about this it property identification number:	em, such as local	
If you	own or have more than one, list here:			
		What is the property? Check all that apply.	De set deduct accord d	
		☐ Single-family home	Do not deduct secured cla the amount of any secured	
1.2.	Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clain	ns Secured by Property.
	,,	Condominium or cooperative	Current value of the	Current value of the
		Manufactured or mobile home	entire property?	portion you own?
		Land	\$	\$
		☐ Investment property ☐ Timeshare	Describe the nature of	f vour ownership
	City State ZIP Code	Other	interest (such as fee :	simple, tenancy by
		Who has an interest in the property? Check one.	the entireties, or a life	estatej, if Known.
		Debtor 1 only		
	County	Debtor 2 only		
	venil		D	
		Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		Debtor 1 and Debtor 2 only At least one of the debtors and another	(see instructions)	mmunity property

Case 16-32506 Filed 10/12/16 Entered 10/12/16 10:29:30 Desc Main Page 12 of 53 Document TATYANA HOPKINS Debtor 1 Case number of ker What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? ■ Manufactured or mobile home Land ☐ Investment property Describe the nature of your ownership City State ZIP Code ☐ Timeshare interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 0.00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles **2** No Yes Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put 3.1. the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another

Doc 1

Other information:

instructions)

Check if this is community property (see

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Debtor 1 TATYANA HOPKINS

First Name Middle Name Last Name

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Case number (# known)

3.3.	Make: Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D:
		☐ Check if this is community property (see instructions)	\$	\$
3.4.	Make: Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
	nples: Boats, trailers, motors, personal watercr lo	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only		d claims on Schedule D:
	Year: Other information:	Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Check if this is community property (see instructions)	\$	\$
If you 4.2.	Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property?	d claims on Schedule D:
Addi				

4.

5.

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Last Name

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Debtor 1

TATYANA HOPKINS Middle Name

First Name

Case number (# known)

Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	2 No	
	Yes. Describe	\$
	· 	
7.	Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	2 No	
	Yes. Describe	\$
	Collectibles of value	J
Ö.	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
	stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	Yes. Describe	s
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	☑ No	
	Yes. Describe	\$
10.	Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	2 No	
	Yes. Describe	\$ S
		<u> </u>
11	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	No .	
	Yes. Describe	\$ 500.00
12.	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	☑ No	
	Yes. Describe	\$
40		us transceres use * sercences !
13.	Non-farm animals Examples: Dogs, cats, birds, horses	
	☑ No	
	Yes, Describe	\$
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	☑ No	20,000
	☐ Yes. Give specific	\$
	information,	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$ 500.00
	for Part 3. Write that number here	→

Document

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Debtor 1

TATYANA HOPKINS First Name Middle Name

Last Name

Case number (it known)

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ш	æ.	نقد	IJ	a.	л

Describe Your Financial Assets

Do you own or have an	y legal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Examples: Money yo	u have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you	u file your petition	
☐ No ☑ Yes			Cash:	\$ 650.00
and other		unts; certificates of deposit; shares in credit unio nultiple accounts with the same institution, list ea		
☑ No ☐ Yes		Institution name:		
	17.1. Checking account:			\$
	17.2. Checking account:	****		\$
	17.3. Savings account			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:			\$
	17.7. Other financial account:			\$
	17.8. Other financial account:			
	17.9. Other financial account:			\$ \$
	s, or publicly traded stocks s, investment accounts with broke Institution or issuer name:	erage firms, money market accounts		\$ \$ \$
19. Non-publicly traded an LLC, partnership,		rated and unincorporated businesses, includ	ling an interest in	
☑ No	Name of entity:		% of ownership:	
Yes. Give specific information about			0%%	\$
them			0%%	\$
			0%%	\$

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TATYANA HOPKINS

Debtor 1

Last Name

L6	01 53		
	Case number	(d known)	

		ks, cashiers' checks, promissory notes, and money orders.	
Non-negotiable instrum	ents are those you cal	nnot transfer to someone by signing or delivering them.	
☑ No			
Yes. Give specific information about	Issuer name:		
them	4.//		\$
	***************************************		\$
	<u></u>		\$
21. Retirement or pension			
	RA, ERISA, Keogh, 40	01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
2 No			
Yes. List each account separately.	Type of account:	Institution name:	
			¢
	401(k) or similar plan:		\$
	Pension plan:		\$
	IRA:		\$
	Retirement account:		\$
			\$
	Keogh:		4
	Additional account:		\$
	Additional account:		\$
Examples: Agreements companies, or others No	with landlords, prepaid	d rent, public utilities (electric, gas, water), telecommunications	
☐ Yes	Ins	titution name or individual:	
		dution hanc or morridge.	
	Electric:		æ.
	Electric:		\$
	Gas:		\$
	Gas:		\$
	Gas: Heating oil: Security deposit on ren		\$ \$
	Gas: Heating oil: Security deposit on ren Prepaid rent:		\$
	Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone:		\$ \$
	Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water:		\$\$ \$\$
	Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone:	tal unit	\$\$ \$\$
	Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water:	tal unit	\$\$ \$\$ \$\$
	Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture:	tal unit	\$\$ \$\$ \$\$
23. Annuities (A contract fo	Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other:	tal unit	\$\$ \$\$ \$\$
23. Annuities (A contract fo	Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other:	tal unit	\$\$ \$\$ \$\$
2 No	Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other:	of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$
	Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other:	of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$
2 No	Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other:	of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$

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Last Name

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Desc Main

Debtor 1

TATYANA HOPKINS Middle Name

Case number (if known)

24. Interests in an education IRA, 26 U.S.C. §§ 530(b)(1), 529A(b)		ount in a qualified ABLE program, or under a qualified state tuiti (b)(1).	ion program.	
2 No	.,	• • • • • • • • • • • • • • • • • • • •		
[TT] v	1	name and description. Comparetally file the accordent emission and 44	11 C C E E24/-\-	
A Serve Assessment of the server of the serv	Institution	name and description. Separately file the records of any interests.11	U.S.U. 8 521(C):	
				\$
	***********			\$
				\$
25. Trusts, equitable or future into exercisable for your benefit	erests in p	property (other than anything listed in line 1), and rights or powe	rs	
☑ No				
Yes. Give specific	.,,,,			
information about them				\$
Examples: Internet domain nam		secrets, and other intellectual property tes, proceeds from royalties and licensing agreements		
Yes. Give specific information about them				\$
**************************************			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
27. Licenses, franchises, and oth Examples: Building permits, exc		al intangibles enses, cooperative association holdings, liquor licenses, professional	licenses	
☑ No				
Yes. Give specific				e.
information about them			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	\$
Money or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you 2 No				
☐ Yes. Give specific information		Feder	at: \$	
about them, including v you already filed the re		State:	\$	
and the tax years				
		LUCI	Ψ	
29. Family support Examples: Past due or lump sur 12 No 13 Yes. Give specific information		, spousal support, child support, maintenance, divorce settlement, pro	operty settlemen	t
• на тоз. Сис эресто писнайс	e t	Alimon	y:	\$
		Mainte	nance:	\$
		Suppor	t:	\$
		Divorce	e settiement:	\$
		Proper	ly settlement.	\$
				- -
Social Security bene	oility insura	ance payments, disability benefits, sick pay, vacation pay, workers' o d loans you made to someone else	ompensation,	
Ø No				
Yes. Give specific information	n			\$
		•	1	7

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Debtor 1 TATYANA HOPKINS

MITMI	A HOMKINS		
irst Name	Middle Name	Last Name	

Case number (# known)

31.	Interests in insurance policies			
	· · · · · · · · · · · · · · · · · · ·	e; health savings account (HSA); credit, home	owner's, or renter's insurance	
	✓ No ✓ Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
				\$
				\$
				\$
22	Any interest in property that is due you f	rom company who has died		
32.	If you are the beneficiary of a living trust, exproperty because someone has died.	pect proceeds from a life insurance policy, or a	re currently entitled to receive	
	☑ No			
	Yes. Give specific information			\$
	\\			
33.	Claims against third parties, whether or in Examples: Accidents, employment disputes No.	not you have filed a lawsuit or made a dema , insurance claims, or rights to sue	nd for payment	
	Yes. Describe each claim			P***V**
34.	to set off claims	s of every nature, including counterclaims o	f the debtor and rights	
	No Sescribe each claim		haaran da da da da da anda da anda da anda da anda da da ada a	•
	Tes. Describe each daim.			\$
	Any financial assets you did not already I No Yes. Give specific information	list		\$
		from Part 4, including any entries for pages		\$650.00
Pa	rt 5: Describe Any Business-R	elated Property You Own or Have	an Interest in. List any r	eal estate in Part 1.
37	Do you own or have any legal or equitable	e interest in any business-related property?		
	2 No. Go to Part 6.			
	Yes. Go to line 38.			
				Current value of the
				portion you own?
				Do not deduct secured claims
				or exemptions.
38.	Accounts receivable or commissions you	already earned		
	☑ No			Ì
	Yes. Describe			\$
~-		· · · · · · · · · · · · · · · · · · ·)
39.	Office equipment, furnishings, and suppl Examples: Business-related computers, software,	ies modems, printers, copiers, fax machines, rugs, teleph	nones, desks, chairs, electronic devices	
	2 No	and the second of the second o	., ,	
	☐ Yes. Describe		kudi umudh ud ud ud ud dud da ud ud da ya da y	
				\$

Case 16-32506 Doc 1 Filed 10/12/16 Entered 10/12/16 10:29:30 Desc Main Document Page 19 of 53 TATYANA HOPKINS Debtor 1 Case number (# 16700wn) Middle Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Mo No Yes. Describe.... 41. Inventory ☑ No Yes. Describe. 42. Interests in partnerships or joint ventures M No ☐ Yes. Describe...... Name of entity: % of ownership: _% 43. Customer lists, mailing lists, or other compilations M No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 44. Any business-related property you did not already list ₩ No ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish

☐ Yes.....

Mo No

Entered 10/12/16 10:29:30 Case 16-32506 Doc 1 Filed 10/12/16 Desc Main Page 20 of 53 Document TATYANA HOPKINS Debtor 1 Case number at known 48. Crops-either growing or harvested M No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Z No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed Z No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list Z No ☐ Yes. Give specific information..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership M No ☐ Yes. Give specific information..... 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here List the Totals of Each Part of this Form Part 8: 0.00 55. Part 1: Total real estate, line 2 0.00 500.00 650.00 0.00

\$ 0.00

57. Part 3: Total personal and household items, line 15

\$ 500.00

58. Part 4: Total financial assets, line 36

\$ 650.00

59. Part 5: Total business-related property, line 45

\$ 0.00

60. Part 6: Total farm- and fishing-related property, line 52

\$ 0.00

61. Part 7: Total other property not listed, line 54

\$ 0.00

\$ 1,150.00

Copy personal property total \$ 1,150.00

\$ 1,150.00

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Fi	II in this inform	ation to identify your case:					
D	ebtor 1 TA	TYANA HOPKINS	Last Name				
	ebtor 2 pouse, if filing) First N		Last Name				
		uptcy Court for the: Northern Distr					
	ase number (known)						k if this is a nded filing
Ot	fficial For	m 106C					
S	chedul	e C: The Pro	perty You	Claim	as Exemp	•	04/16
Usir spa	ng the property y ce is needed, fill	accurate as possible. If two marou listed on Schedule A/B: Pro out and attach to this page as a number (if known).	perty (Official Form 106/	VB) as your so	ource, list the property that	you claim as exempt. If r	nore
spe of a reti limi	cific dollar amo iny applicable s rement funds ts the exemptic	roperty you claim as exempt, ount as exempt. Alternatively, tatutory limit. Some exemption may be unlimited in dollar an on to a particular dollar amous the applicable statutory amousts.	, you may claim the full ons—such as those for nount. However, if you nt and the value of the	l fair market v r health aids, i claim an exer	alue of the property bein rights to receive certain t nption of 100% of fair ma	g exempted up to the a penefits, and tax-exemp rket value under a law	mount ot that
	You are da	xemptions are you claiming? iming state and federal nonban iming federal exemptions. 11 to the you list on Schedule A/B to	nkruptcy exemptions. 11 J.S.C. § 522(b)(2)	U.S.C. § 522(I	b)(3)		
	•	ion of the property and line on that lists this property	Current value of the portion you own	Amount of t	he exemption you claim	Specific laws that allow	w exemption
			Copy the value from Schedule A/B	Check only o	ne box for each exemption.		
	Brief description: Line from Schedule A/B:	MONEY	\$ <u>650.00</u>		fair market value, up to icable statutory limit		
	Brief description: Line from Schedule A/B:	CLOTHES	\$ <u>500.00</u>		fair market value, up to icable statutory limit		
	Brief description: Line from Schedule A/B:		\$		fair market value, up to icable statutory limit		
3.	(Subject to adju	ng a homestead exemption o struent on 4/01/19 and every 3 u acquire the property covered	years after that for case				

Document

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Debtor 1

TATYANA HOPKINS

Middle Name

Case number (# known)_

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$	☐ \$ ☐ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	☐ \$ ☐ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	<u></u> \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description;	\$	Q s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$\$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	D s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	Q \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	A
Brief description:	\$	☐ \$ ☐ 100% of fair market value, up to	
Line from Schedule A/B: ———		any applicable statutory limit	
Brief description:	\$	<u> </u>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	0 \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	☐ \$ ☐ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	O \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your case	se:			
Sahara TATYANA HOPKINS				
Debtor 1 First Name Middle	Name Last Name			
Debtor 2				
(Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number (If known)			☐ Check	if this is an
<u></u>	· · · · · · · · · · · · · · · · · · ·		amend	ed filing
Official Form 106D				
0-1-1-1-10-0134	- W II Ol-: C			
Schedule D: Creditor	s Who Have Claims Secur	ea by Prop	erty	12/15
Be as complete and accurate as possible.	If two married people are filing together, both are e	qually responsible f	or supplying correc	ŧ
information. If more space is needed, cop	y the Additional Page, fill it out, number the entries.	and attach it to this	form. On the top of	any
additional pages, write your name and ca	se number (if known).			
1. Do any creditors have claims secured t	w water pranarhy?			
	ny your property? m to the court with your other schedules. You have not	sing alea to report on t	thic form	
Yes. Fill in all of the information below.	•	mig eise to report on t	ias ioni.	
Tes. Filt in all of the information below.				
Partitle List All Secured Claims				
Partification List All Secured Claims				
2 List all secured claims. If a creditor has r	nore than one secured claim, list the creditor separately	Column A	Column B	Column C Unsecured
	as a particular claim, list the other creditors in Part 2.	Amount of claim Do not deduct the	Value of collateral that supports this	portion
As much as possible, list the claims in alpl	nabetical order according to the creditor's name.	value of collateral.	claim	If any
2.1	St. 19 of the state of the stat		•	
	Describe the property that secures the claim:	<u> </u>	\$	\$
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that apply	<i>l</i> !.		
	☐ Contingent			
	Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)	44000		
community debt				
Date debt was incurred	Last 4 digits of account number		on men na hala saka kalan kanan manan na kanan kalan kanan kanan kanan kanan kanan kanan kanan kanan kanan kan	
2.2	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street		tente		
	As of the date you file, the claim is: Check all that apply			
	Contingent Unliquidated			
City State ZIP Code	Disputed			
Mills a source Africa district Office of the second	,			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
****	Other (including a right to offset)	···		
Check if this claim relates to a				
community debt	Last 4 digits of account number			
Date debt was incurred	Last 4 digits of account number	enactor en un septembro estado en estado en entre un entre en estado en estado en estado en estado en estado e	and the state of t	CONTRACTORS STREET, AND SHOULD STREET BY THE CO.
and the addar value of your entries in t	Column A on this nage. Write that number here:	ND .	1	

Entered 10/12/16 10:29:30 Filed 10/12/16 Desc Main Case 16-32506 Doc 1 Page 24 of 53 Document TATYANA HOPKINS Debtor 1 Case number (# known) Micidie Name Last Name Column A Column B Column C **Additional Page** Unsecured Amount of claim Value of collateral Part 1: After listing any entries on this page, number them beginning with 2.3, followed that supports this portion Do not deduct the by 2.4, and so forth. value of collateral. claim if any Describe the property that secures the claim: Creditor's Name

Number Street				
	- As of the date you file, the claim is: Check all that apply			
	☐ Contingent			
City State ZIP Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)	_		
Date debt was incurred	Last 4 digits of account number			
The state of the s	Describe the property that secures the claim:		\$	\$
Creditor's Name	The second secon	-1	· · · · · · · · · · · · · · · · · · ·	
	•			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.				
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	_		
community debt				
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	S	S CONTRACTOR OF THE CONTRACTOR
Creditor's Name				
Number Street				
	 As of the date you file, the claim is: Check all that apply. 			
	Contingent			
City State ZiP Code	Unliquidated Disputed			
	·			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	 An agreement you made (such as mortgage or secured car loan) 			
Debtor 2 only Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
	Other (including a right to offset)	•••		
☐ Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entrice	es in Column A on this page. Write that number here:	\$		
•	n, add the dollar value totals from all pages.		1	
Write that number here:	· · · · · · · · · · · · · · · · · · ·	\$	4	

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Debtor 1

TATYANA HOPKINS

rst Name	Middle Name	Last Name

Case number (if known)

9450300000000000000000000000000000000000	List Others to Be Notified for a Debt That You Already Listed	
: FT 1 1/4 1888	List Others to Be Notified for a Debt That You Already Listed	

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? ___ Name Last 4 digits of account number Number Street State ZIP Code City On which line in Part 1 did you enter the creditor? ____ Last 4 digits of account number ___ __ ___ Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? _____ Last 4 digits of account number ____ _ Name Number Street ZIP Code State City On which line in Part 1 did you enter the creditor? ____ Last 4 digits of account number ____ Name Number Street State ZIP Code City On which line in Part 1 did you enter the creditor? ___ Last 4 digits of account number _____ Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? _ Last 4 digits of account number ___ __ __ Name Number Street

ZIP Code

State

City

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Fill	in this information to identify your case:	Pare 75 01 53			
Det	otor 1 TATYANA HOPKINS				
Dot	First Name Middle Name	Last Name			
	ouse, if filing) First Name Middle Name	Last Name			
Uni	ted States Bankruptcy Court for the: Northern District	of Illinois		porting.	
	se number				ck if this is an ended filing
~	C I C 400 C / C	and the second s			
	ficial Form 106E/F	/ho Have Unsecured Clain	•		40/45
					12/15
List : A/B: cred need any a	the other party to any executory contracts or u Property (Official Form 106A/B) and on Sched itors with partially secured claims that are liste led, copy the Part you need, fill it out, number is additional pages, write your name and case nu		st executory of Official Form 1 red by Propert	ontracts on 5 106G). Do not y. If more spa	Schedule i include any ice is
Par	List All of Your PRIORITY Unsecur	ed Claims			
_	o any creditors have priority unsecured claim	s against you?			
	✓ No. Go to Part 2. ✓ Yes.				
		editor has more than one priority unsecured claim, list t	he creditor sepa	arately for eac	h daim. For
е.	ach claim listed, identify what type of claim it is, If	a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's n	nat claim here a	and show both	priority and
n u	ionphonty amounts. As much as possible, list the trinsecured claims, fill out the Continuation Page of	Part 1. If more than one creditor holds a particular claim	n, list the other	creditors in Pa	nt 3.
(1	For an explanation of each type of claim, see the i	nstructions for this form in the instruction booklet.)	1. 1.		
			Total claim	Priority amount	Nonpriority amount
2.1				_	_
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
		When was the debt incurred?			
	Number Street	A - of the data and the state in Chest all the seaton			
		As of the date you file, the claim is: Check all that apply Contingent	y .		
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only				
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Domestic support obligations			
	Check if this claim is for a community debt	Taxes and certain other debts you owe the government			
	<u> </u>	Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset?	Other. Specify			
	D vos				
2.2					
	Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	\$
		When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply	v.		
		Contingent	, .		
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of BBIODITY unageness states			
	Debtor 2 only	Type of PRIORITY unsecured claim: Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	At least one of the debtors and another	axes and certain other debts you owe the government Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated intoxicated			
	Is the claim subject to offset?	Other. Specify	•		
	☐ No ☐ Yes				

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Debtor 1

TATYANA HOPKINS

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fter listing any entries on this page, number ther	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
3.00	As of the date you file, the claim is: Check all that apply.			
<u> </u>	· · · · · · · · · · · · · · · · · · ·			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
_	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
to the observe and the of the officers	we outer opeony			
Is the claim subject to offset?				
□ No				
☐ Yes ☐		antana an-a-an-a-an-a-bahari manta nasi ila membe		annike kanaan kanaan kenemin kelalanian er
and the second s			•	
Priority Creditor's Name	Last 4 digits of account number		\$	2
Tribilly Oreands 5 seaso	When was the debt incurred?			
Number Street	when was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 1 only Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Claims for death or personal injury while you were intoxicated			
☐ Check if this claim is for a community debt	Other. Specify			
to the plaim audient to affect?	- Caron opens			
Is the claim subject to offset?				
□ No				
The second of th			termonovimenterinominovo prograndentered	
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	and a siding to proper interest			
	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
- Check it dis claim is for a community dept	Other. Specify			
Is the claim subject to offset?				

Yes

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TATYANA HOPKINS

Last Name

22 Tt 22	List All of	Your NO	ONPRIORITY	Unsecured	Claims
SERVICE CONTROL CONTRO					

3. Do any creditors have nonpriority unsecured claims against you?

4. I	nonpriority unsecured claim, list the cred	l claims in ditor sepan ditor holds	the alphabetic ately for each cl	al order of the creditor who holds each claim. If a creditor has aim. For each claim listed, identify what type of claim it is. Do not not list the other creditors in Part 3.If you have more than three not	t list claims al	ready
					Total claim	, THEN
1.1	CITY OF CHICAGO			Last 4 digits of account number	e 9.0	00.00
	Nonpriority Creditor's Name PO BOX 804556			When was the debt incurred?	φ	
	Number Street		00000	water-		
	CHICAGO City	IL_ State	60680 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. Debtor 1 only			Contingent Unliquidated Disputed		
	Debtor 2 only			Time of MONDRIORITY unacquired claims		
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans		
	Check if this claim is for a commun	nity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset? ☐ No ☐ Yes			Debts to pension or profit-sharing plans, and other similar debts Other. Specify	3	
1.2	CREDIT COLLECTION SERV	ICE		Last 4 digits of account number	\$2	99.00
	Nonpriority Creditor's Name			When was the debt incurred?		
	PO BOX 710 Number Street			AAATRIA-		
	NORWOOD	MA	02062	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
	Debtor 1 only Debtor 2 only			- Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			Student loans		
	☐ Check if this claim is for a commun	nity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	i	
	□ No □ Yes			Other. Specify		
1.3	o comi a min termina in tradicio accentracione di alcontracione di alcontracione de la contracto de la contractor del la contractor de la contractor de la contractor de la contractor de la contract	andrikal seripensel verme kan lipidenski medensibiliski verdiriliki verdiriliki	\$1000000000000000000000000000000000000	Last 4 digits of account number		299.00
	Nonpriority Creditor's Name			When was the debt incurred?	\$	99.00
	PO BOX 3097 Number Street			<u></u>		
	Number Street BLOOMINGTON City	IL State	61702 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	•	Olave	Zar Obde	☐ Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only Debtor 2 only			☐ Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			Student loans		
	Check if this claim is for a commun	nity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		:
	☐ No ☐ Yes			Other Specify		;

TATYANA HOPKINS

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Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

After I	After listing any entries on this page, number them beginning with 4.4			n 4.4, followed by 4.5, and so forth.	Total claim	
	DISCOVER FINANCIAL SE	RVICE	MANAGEM PARAMETER ST.	Last 4 digits of account number	\$_1,149.00	
	onpriority Creditor's Name PO BOX 15316			When was the debt incurred?		
	umber Street WILMINGTON	DE	19850	As of the date you file, the claim is: Check all that apply.		
	ity	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
-				☐ Disputed		
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			☐ Student loans		
	At least one of the debtors and anoth	ner		Obligations arising out of a separation agreement or divorce that		
r	Check if this claim is for a com	nuaitu daht		you did not report as priority claims		
		numny debt		Debts to pension or profit-sharing plans, and other similar debts		
	s the claim subject to offset?			Other. Specify		
	No Yes					
]	ENHANCED RECOVERY O		(1984), estituir estituires (1984) de estiviteres (1981) estivos (1984), estiv	Last 4 digits of account number	\$ <u>1,781.0</u>	
N	lonpriority Creditor's Name			When was the debt incurred?		
	PO BOX 57547			THE WAS THE GOOD PROPERTY.		
	lumber Street	E1	22244	As of the date you file, the claim is: Check all that apply.		
	JACKSONVILLE	FL State	32241 ZIP Code	Contingent		
Ü	sty	Outo	2., 0425	Unliquidated		
V	Vho incurred the debt? Check one.			Disputed		
	Debtor 1 only					
	Debtor 2 onty			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			☐ Student loans		
	At least one of the debtors and anoth	her		Obligations arising out of a separation agreement or divorce that		
	Check if this claim is for a com	nunity debt		you did not report as priority claims		
	s the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts		
	No			Other. Specify		
	⊒ No ⊒ Yes					
The policy of th	and the second s	nterioristica (necessaria de la companio de la comp	randy week Arthumpe with the service of the miles of the service of the Arthur St.	Last 4 digits of account number	\$	
N	tonpriority Creditor's Name			When was the debt incurred?		
Ñ	lumber Street			As of the date you file, the claim is: Check all that apply.		
č	ity	State	ZIP Code	Contingent		
	After two comes of the state to the state of			Unliquidated		
	Who incurred the debt? Check one.			☐ Disputed		
	Debtor 1 only			Type of NONPRIORITY unsecured claim:		
	Debtor 2 only Debtor 1 and Debtor 2 only					
	Debtor 1 and Debtor 2 only At least one of the debtors and anotic	her		Student loans Obligations original out of a conception correspond or diverse that		
				 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
Ļ	Check if this claim is for a com	nunity debt		Debts to pension or profit-sharing plans, and other similar debts		
	s the claim subject to offset?			Other Specify		
	☑ No ☑ Yes					

Part 3:

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List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
City State ZIP Coo	Georgia, pagang a manganana at a sa s
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
City State ZIP Coc	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Cod	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
***************************************	Claims
City State ZIP Cod	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Cod	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Humber Street	Part 2: Creditors with Nonpriority Unsecured Claims
City State ZIP Cod	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
City State ZIP Cod	Last 4 digits of account number

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ _{\$}	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i.	+ \$	12,528.00
	6j. Total. Add lines 6f through 6i.	6 j.	\$	12,528.00

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W/W/www.whom		On the Control of the			vestimate hidroritions the biometric	
Fill	l in this ir	iformation to ide	entify your case:			
		TATYANA H	OPKINS			
Del	btor	First Name	Middle Name	Last Name		
	btor 2					
(Spi	ouse If filling)	First Name	Middle Name	Last Name		
Uni	ited States	Bankruptcy Court fo	or the: Northern District of I	llinois		
Cas	se number					-
(If k	аками)					Check if this is an
	······································					amended filing
Off	ficial F	Form 1060	3			
C -	le a de	ula C. E.	 roomkomr Cor	stroote and	Unoversed London	40140
JU	neu	ale G: Ex	recutory con	itracts and	Unexpired Leases	12/15
infor addi 1.	mation. I tional pay Do you h	f more space is ges, write your n ave any executo heck this box and	needed, copy the additioname and case number (in ory contracts or unexpired the file this form with the countries or the cou	onal page, fill it out, nui if known). ed leases? int with your other schedi	pether, both are equally responsible for sup mber the entries, and attach it to this page. ules. You have nothing else to report on this fo	On the top of any
	Yes. I	ill in all of the inf	ormation below even if the	contracts or leases are	listed on Schedule A/B: Property (Official Form	n 106A/B).
2	l ist sena	rately each pers	on or company with wh	om you have the contra	act or lease. Then state what each contract	or lease is for /for
	example,	rent, vehicle lea			in the instruction booklet for more examples of	
	unexpired	l leases.				
	Person	r company with	whom you have the con	tract or lease	State what the contract or lease is:	for
	r 613011 0	company will	WITCH YOU HEVE GIE CON	nace of rease	Otate what the contract of lease is	
2.1						
2.1						
	Name					
	Number	Street				
	City		State ZIP Code			
2.2						
7.7	Name					
	Name					
	Number	Street				
	City		State ZIP Code		er e	
2.3						
	Name	······································		,		
	Number	Street				
	City		State ZIP Code			
	× 100		olate zii code		to the term of the	terepena natambera di sering tang amadaga basepa natawa
2.4						
	Name					
	Number	Street				
	HUMBE	Jucci				
	City		State ZIP Code			
2.5	and a second and a second and a second					
	Name					
	Name					
	Number	Street				
	City		State ZIP Code			

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2._

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			2000	annone rago o	· •. ••	
Fill	in this i	nformation to iden	itify your case:			
Debi	tor 1	TATYANA HO	PKINS			
Debi	hor 2	First Name	Middle Name	Last Name		
) First Name	Middle Name	Last Name		
Unite	ed States	Bankruptcy Court for	the: Northern District of Illinois			
	e number					
(If kn	iown)				☐ Check if the amended	
~ **		- 40011			anondo	iiii ig
		Form 106H				
Sc	hed	ule H: Yo	ur Codebtors			12/15
are fil and n case	ing tog umber 1 number	ether, both are equithe entries in the b (if known). Answe	ually responsible for supplyi ooxes on the left. Attach the	ng correct information. If Additional Page to this pa	as complete and accurate as possible. If two marrie more space is needed, copy the Additional Page, fill age. On the top of any Additional Pages, write your notes a codebtor.)	l it out,
	ZI No					
	Yes					
			ve you nived in a community ouisiana, Nevada, New Mexic		? (Community property states and territories include chington, and Wisconsin.)	
6	1 No. 0	So to line 3.				
[Yes.	Did your spouse, fo	rmer spouse, or legal equivale	ent live with you at the time	?	
	□ N					
	∐ Y	es. In which comm	unity state or territory did you l	ive?	. Fill in the name and current address of that person.	
	.	·		**************************************	-	
	ħ	varne of your spouse, tom	ner spouse, or legal equivalent			
	4	lumber Street	······································		-	
	7	City	State	ZIP Code	-	
					if we will be the second of th	
s	shown ii Schedul	n line 2 again as a e D (Official Form	codebtor only if that person	is a guarantor or cosigno	r if your spouse is filing with you. List the person er. Make sure you have listed the creditor on ule G (Official Form 106G). Use Schedule D,	
	Column	1: Your codebtor			Column 2: The creditor to whom you owe the	debt
·					Check all schedules that apply:	
3.1					Schedule D, fine	
	Name				☐ Schedule E/F, line	
	Number	Street			☐ Schedule G, line	
	City		State	ZIP Code		
3.2						
	Name				Schedule D, line	
	Number	Street			Schedule E/F, line	
	14GHDG(GUEEL			Schedule G, line	
	City		State	ZIP Code		
3.3					Schedule D, line	
	Name				Schedule E/F, line	
	Number	Street			G Schedule G, line	
	City		State	ZIR Code	Note that will be a second of the second of	

Document

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Debtor 1

TATYANA HOPKINS
First Name Middle Name

Last Name

Case number (if known)__

	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the deb	Æ
_					Check all schedules that apply:	
_]					☐ Schedule D, line	
	Name				Schedule E/F, line	
	Number	Street			☐ Schedule G, line	
٦	City		State	ZIP Code		
_]				<u></u>	☐ Schedule D, line	
	Name				☐ Schedule E/F, line	
	Number	Street			☐ Schedule G, line	
_	City		State	ZIP Code		
					Schedule D, line	
	Name				Schedule E/F, line	
	Number	Street			☐ Schedule G, line	
_	City	-	State	ZIP Code		
-					Cahadida D. lina	
	Name		3744		☐ Schedule D, line	
					Schedule G, line	
	Number	Street			Scriedule of mie	
	City		State	ZiP Code		
	Name				Schedule D, line	
					☐ Schedule E/F, line Schedule G, line	
	Number	Street			Greate O, me	
	City		State	ZIP Code		
.]						
!	Name				Schedule D, line	
					☐ Schedule E/F, line ☐ Schedule G, line	
	Number	Street			Griedule G, inte	
	City		State	ZiP Code		
-					Cahadula D. lina	
	Name				☐ Schedule D, line ☐ Schedule E/F, line	
	No.	Character and a second a second and a second a second and			Schedule G, line	
	Number	Street				
	City	NAME OF TAXABLE PARTY O	State	ZIP Code		
					Cohadula D. lina	
	Name				☐ Schedule D, line ☐ Schedule E/F, line	
					Schedule G, line	
	Number	Street				
	City		State	ZIP Code		

Fill in this information to identify	your case:				
Debtor 1 TATYANA HOPK	INS				
First Name Debtor 2	Middle Name	Last Name			
(Spouse, if filing) First Name	Middle Name	Last Name		-	
United States Bankruptcy Court for the:	Northern District of Illinois				
Case number(If known)				Check if	
					mended filing optopetition chapter 13
					ne as of the following date:
Official Form 106I				MM /	DD / YYYY
Schedule I: You	ir Income				12/15
supplying correct information. If yo	ou are married and not fi se is not filing with you, top of any additional pa	ling jointly, and you do not include in	our spo formati	use is living with on about your sp	tor 2), both are equally responsible for you, include information about your spouse. ouse. If more space is needed, attach a known). Answer every question.
Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☑ Employed ☐ Not employ	ed		☐ Employed ☐ Not employed
Include part-time, seasonal, or self-employed work.	Occupation	CUSTOMER	SER'	VICE ASST	
Occupation may include student or homemaker, if it applies.	Ососранон				
	Employer's name	WALMART			
	Employer's address	9450 JOLIET Number Street	RD		Number Street
		HODGKINS	State	IL 60525 ZIP Code	City State ZIP Code
	How long employed the	ere?			white your look of the Artifaction of the Artifacti
Part 2: Give Details About	Monthly Income				
-	=	m. If you have noth	ing to n	eport for any line, v	wite \$0 in the space. Include your non-filing
spouse unless you are separated. If you or your non-filing spouse habelow. If you need more space, at	ve more than one employ		ımatio	n for all employers	for that person on the lines
			100	For Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, sala deductions). If not paid monthly,			2.	\$ <u>1,800.00</u>	\$
3. Estimate and list monthly over	time pay.		3	+\$ 0.00	+ \$
4. Calculate gross income. Add lin	ne 2 + line 3.		4.	\$ 1,800.00	\$

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Debtor 1

FATYANA	HOPKINS			

		Fo	r Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$	1,800.00	\$	
List all payroll deductions:					
5a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	
5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	
5c. Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	
5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	
5e. Insurance	5e.	\$	0.00	\$	
5f. Domestic support obligations	5f.	\$	0.00	\$	
•	5g.	\$	0.00	\$	
5g. Union dues 5h. Other deductions. Specify:	5g. 5h.	+\$	0.00		
Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h		* \$_ \$	0.00	+ \$ \$	
		Ψ	***************************************		
Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	
List all other income regularly received:					
8a. Net income from rental property and from operating a business, profession, or farm					
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.00	\$	
8b. Interest and dividends	8b.	\$	0.00	\$	
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	ent	-			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	\$	
8d. Unemployment compensation	8d.	\$	0.00	\$	
8e. Social Security	8e.	\$	0.00	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$	0.00	\$	
8g. Pension or retirement income	8g.	\$	0.00	\$	
8h. Other monthly income. Specify:	8h.	+ \$	0.00	+\$	
Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	0.00	\$	
Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	1,800.00	- \$=	\$ 1,800.00
State all other regular contributions to the expenses that you list in Sche Include contributions from an unmarried partner, members of your household, friends or relatives.			ents, your room	nmates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are Specify:		/ailable	e to pay expens	es listed in <i>Schedule J.</i>	\$0.00
Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain				•	\$ 1,800.00
B. Do you expect an increase or decrease within the year after you file this ✓ No. ✓ Yes. Explain:	form?		***************************************		Combined monthly income

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Fill in this information to identify	/ your case:			
Debtor 1 TATYANA HOPK		Check if this	. io:	
First Name Debtor 2	Middle Name Last Name			
(Spouse, if filing) First Name	Middle Name Last Name	An amer	naea ming ement showing postp	petition chapter 13
United States Bankruptcy Court for the:	Northern District of Illinois	• • • • • • • • • • • • • • • • • • •	s as of the following	=
Case number(If known)		MM / DD	/ YYYY	
Official Form 106J	-			
Schedule J: Yo	ur Expenses			12/15
	ossible. If two married people are fili led, attach another sheet to this form i.			
Partid: Describe Your Ho	usehold			
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a	separate household?			
☐ No ☐ Yes. Debtor 2 must fi	le Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	☐ No		10 (10 (10 (10 (10 (10 (10 (10 (10 (10 (
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	·	DAUGHTER	5	☐ No ☑ Yes
		SON	1	☐ No ☑ Yes
				□ No □ Yes
				☐ No ☐ Yes
				☐ No
				☐ Yes
Do your expenses include expenses of people other than yourself and your dependents?	Mo No ☐ Yes			
Part 2: Estimate Your Ongo	ing Monthly Expenses			
	r bankruptcy filing date unless you a nkruptcy is filed. If this is a supplem			
•	n-cash government assistance if you		Your exper	nses.
	d it on Schedule I: Your Income (Offi expenses for your residence. Include	•		etin Cinetineti etineti etineti etineti eti konierti eriteri etineti etineti eti
any rent for the ground or lot.	expenses for your residence. module	ast nortgage payments and	4. \$	600.00
If not included in line 4:			12 °	0.00
4a. Real estate taxes	renter's insurance		4a. \$ 4b. \$	0.00
4b. Property, homeowner's, or4c. Home maintenance, repair,			4b. \$	0.00
4c. Homeowner's association of	. , ,		4d \$	0.00

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Debtor 1

TATYANA HOPKINS

First Name Middle Name Last Name

Case number (if known)

			Your exp	oenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
	Utilities:	-		
6.	6a. Electricity, heat, natural gas	6a.	\$	200.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	50.00
	6d. Other. Specify:	6d.	\$	0.00
7.		7.	\$	200.00
8.	Childcare and children's education costs	8.	s	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$ \$	50.00
10.	Personal care products and services	10.	\$	50.00
11.	Medical and dental expenses	11.	\$	50.00
12.	Transportation. Include gas, maintenance, bus or train fare.		\$	100.00
	Do not include car payments.	12.		0.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incomp	e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor 1	TATYANA HOPKINS First Name Middle Name Last Name	number (if known)		**************************************
	Task retire industriction Cash retire			
21. Oth	er. Specify:	21.	+\$	0.00
22. Cal c	ulate your monthly expenses.		A Vanderson Survey of the Control of	and the section and control or comment of the section of the secti
22a.	Add lines 4 through 21.	22a.	\$	1,300.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$	1,300.00
			L	***************************************
23. Calcu	late your monthly net income.			1 000 00
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,800.00
23b.	Copy your monthly expenses from line 22c above.	23b.	- \$	1,300.00
23c.	Subtract your monthly expenses from your monthly income.		e.	500.00
	The result is your monthly net income.	23c .	Φ	000.00
24. Do y e	ou expect an increase or decrease in your expenses within the year after you file this	s form?		
	xample, do you expect to finish paying for your car loan within the year or do you expect you			
•	age payment to increase or decrease because of a modification to the terms of your mort	gage?		
521 N				
U Ye	S. Explain here:			:

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				1 agc 41 01 33	
l in this infor	mation to identi	fy your case:			
. ТА	ATYANA HOP	OKING			
	st Name	Middle Name	Last Name		
otor 2 ouse, if filing) First	st Name	Middle Name	Last Name		
ied States bani se number	krupicy Court for the	e: Northern District of	iminois		
nown)	·····				ma
·····					Check if this i amended filin
	ration A		Individua	l Debtor's Schedules	12/1
two married	l people are filin	g together, both are	equally responsible for	r supplying correct information.	
btaining more	ney or property	•	ion with a bankruptcy	nded schedules. Making a false statement, cor case can result in fines up to \$250,000, or impr	
btaining more ears, or both Si Did you pa	ney or property L. 18 U.S.C. §§ 15 ign Below	by fraud in connection 52, 1341, 1519, and 3	ion with a bankruptcy of		
btaining more ears, or both. Si Did you pa	ney or property 1. 18 U.S.C. §§ 15 ign Below ay or agree to pa	by fraud in connection is the same one who is	ion with a bankruptcy of	ase can result in fines up to \$250,000, or impr	isonment for up to 20
btaining morears, or both. Si Did you pa	ney or property L. 18 U.S.C. §§ 15 ign Below	by fraud in connection is the same one who is	ion with a bankruptcy of	case can result in fines up to \$250,000, or impr	isonment for up to 20
btaining morears, or both. Si Did you pa No Yes. N Under penathat they as	ign Below ay or agree to pa	by fraud in connection of the second section of the second section of the section	non with a bankruptcy of 3571. NOT an attorney to hele the summary and	p you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, De	isonment for up to 20
Did you pa No Yes. N Under penathat they as	ign Below ay or agree to pa	by fraud in connection 52, 1341, 1519, and 3 systems who is high declare that I have it	ion with a bankruptcy of 3571. NOT an attorney to hel	p you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, De Signature (Official Form 119).	isonment for up to 20

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	nformation to identif	y your case:			
Debtor 1	TATYANA HOPI	KINS Middle Name	Last Name		
Debtor 2	***		Last rearie	Address tension of the construct survivor	
(Spouse, if filing)		Middle Name	Last Name		
	Bankruptcy Court for the	: Northern District o	f Illinois		
Case number (If known)					Check if this is ar amended filing
					anended ming
***************************************	orm 107 ent of Fina	ncial Affai	irs for Indiv	iduals Filing for Ban	ikruptcy 04/1
nformation. I number (if kno	lf more space is nee own). Answer every	ded, attach a sepa question.	rate sheet to this for	g together, both are equally responsil m. On the top of any additional pages	ple for supplying correct s, write your name and case
	ive Details About our current marital s		atus and where Y	ou Lived Before	
☐ Marrie					
Maine Not m					
	ist all of the places yo	ou lived in the last 3	years. Do not include Dates Debtor 1 lived there	where you live now. Debtor 2:	Dates Debtor 2 lived there
				Same as Debtor 1	☐ Same as Debtor 1
Num	nber Street		From	Number Street	From
	Sueet		To	Number Street	To
City		State ZIP Code		City State Z	P.Codo
ŕ				Same as Debtor 1	Same as Debtor 1
			From		From
			То	Number Street	To
Num	ber Street				
Num	iber Street				The state of the s
	nber Street	State 7IP Code			700-1-
Num	iber Street	State ZIP Code	-	City State	ZIP Code
City 3. Within the	e last 8 years, did yo	u ever live with a s	pouse or legal equi	ralent in a community property state o	or territory? (Community property
City 3. Within the states and	e last 8 years, did yo	u ever live with a s	pouse or legal equivation, Louisiana, Nevac	•	or territory? (Community property
City 3. Within the states and	e last 8 years, did yo	u ever live with a s zona, California, Ida	iho, Louisiana, Nevad	valent in a community property state of a, New Mexico, Puerto Rico, Texas, Wa	or territory? (Community property

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	TATYANA HOPKINS First Name Middle Name Last	Name	Case nu	mber (if known)	
Fill i	you have any income from employment in the total amount of income you received u are filing a joint case and you have income the second second income the second second income the second secon	d from all jobs and all busi	nesses, including part-tir	me activities.	endar years?
□ /	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions a exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$1,800.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For last calendar year:	☐ Wages, commissions,		☐ Wages, commissions,	
	(January 1 to December 31,)	bonuses, tips Operating a business	\$	bonuses, tips Operating a business	\$
	For the calendar year before that:	☐ Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips	
	(January 1 to December 31,)	Operating a business	\$	Operating a business	\$
unen	de income regardless of whether that inc nployment, and other public benefit paym bling and lottery winnings. If you are filing	ents; pensions; rental inco	ome; interest; dividends;	money collected from laws	suits; royalties; and
unen gamt List e	nployment, and other public benefit paym bling and lottery winnings. If you are filing each source and the gross income from e	ents; pensions; rental inco a joint case and you have	of other income are alim ome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
unen gamt List e	nployment, and other public benefit paym bling and lottery winnings. If you are filing each source and the gross income from e	ents; pensions; rental inco a joint case and you have	of other income are alim ome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
unen gamb List e	nployment, and other public benefit paym bling and lottery winnings. If you are filing each source and the gross income from e	ents; pensions; rental inco a joint case and you have each source separately. Do	of other income are alim ome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once you listed in line 4.	suits; royalties; and a under Debtor 1. Gross income from each source
unen gamt List e	nployment, and other public benefit paymoling and lottery winnings. If you are filing each source and the gross income from eloofes. Fill in the details. From January 1 of current year until	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1 Sources of income Describe below.	of other income are alimone; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions a exclusions)
unen gamb List e	nployment, and other public benefit paym bling and lottery winnings. If you are filing each source and the gross income from e lo 'es. Fill in the details.	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1 Sources of income Describe below.	of other income are alimone; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions a exclusions)
unen gamb List e	nployment, and other public benefit paymoling and lottery winnings. If you are filing each source and the gross income from eloofes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	pents; pensions; rental income a joint case and you have a joint case and you have ach source separately. Do Debtor 1 Sources of income Describe below.	of other income are alimone; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions a exclusions)
unen gamb List e	nployment, and other public benefit paymoling and lottery winnings. If you are filing each source and the gross income from eloofes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1 Sources of income Describe below.	of other income are alimone; interest; dividends; income that you receive to not include income that Gross income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions a exclusions)
unen gamb List e	nployment, and other public benefit paymoling and lottery winnings. If you are filing each source and the gross income from elo fes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year:	ents; pensions; rental inco a joint case and you have ach source separately. Do Debtor 1 Sources of income Describe below.	of other income are alimone; interest; dividends; income that you receive to not include income that Gross income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions a exclusions)
unen gamb List e	nployment, and other public benefit paymoling and lottery winnings. If you are filing each source and the gross income from elo fes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year:	pents; pensions; rental income a joint case and you have ach source separately. Do Debtor 1 Sources of income Describe below.	of other income are alimone; interest; dividends; income that you receive to not include income that Gross income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions at exclusions) \$

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Document Page 44 of 53 TATYANA HOPKINS Debtor 1 Case number (if known) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Ano. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Total amount paid Amount you still owe Dates of Was this payment for... payment Mortgage Creditor's Name Car Credit card Number Street Loan repayment Suppliers or vendors Other City State ZIP Code ☐ Mortgage Creditor's Name Car Credit card Number Street

City

City

Creditor's Name

Number Street

State

State

7iP Code

ZIP Code

Loan repayment Suppliers or vendors

Other_

Mortgage

Loan repayment Suppliers or vendors Other____

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	TATYANA HOPKINS	 		-	Case number (if known)	
	First Name Middle Name	Last Name				
<i>Inside</i> comor agent,	n 1 year before you filed for be in sinclude your relatives; any ge rations of which you are an office, including one for a business you as child support and alimony.	eneral partners; er, director, per	relatives of any son in control, o	general partners; p	artnerships of whice more of their voting	th you are a general partner; securities; and any managing
Z No)					
☐ Ye	es. List all payments to an inside	er.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
ir	nsider's Name			\$	\$	
***	······································					
N	lumber Street					
-	The same of the sa	710 Code				
C	ity State	e ZIP Code		•	_	
Īr	isider's Name			\$	\$	
Ñ	lumber Street					
_			-			
	State State					
Vithin in ins nclude Ž	1 year before you filed for ba ider? e payments on debts guarantee	nkruptcy, did y d or cosigned by	y an insider. Dates of	Total amount		n account of a debt that benefite Reason for this payment
Vithin in ins nclude Ž i No	1 year before you filed for ba ider? e payments on debts guarantee	nkruptcy, did y d or cosigned by	y an insider.	·		
Vithin in ins nclude No No	1 year before you filed for ba ider? e payments on debts guarantee	nkruptcy, did y d or cosigned by	y an insider. Dates of	Total amount		Reason for this payment
Vithin an ins nclude No 1 Yes	1 year before you filed for ba ider? e payments on debts guarantee s. List all payments that benefit	nkruptcy, did y d or cosigned by	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
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Within nn ins nclude No N	1 year before you filed for baider? e payments on debts guarantee s. List all payments that benefite sider's Name umber Street	nkruptcy, did y d or cosigned by ed an insider.	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
Nithin no	1 year before you filed for baider? e payments on debts guarantee s. List all payments that benefits sider's Name umber Street	nkruptcy, did y d or cosigned by ed an insider.	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment

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TATYANA HOPKINS Debtor 1 Case number (if known) Middle Name Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. M No Yes. Fill in the details. Nature of the case Court or agency Status of the case Pending Case title Court Name On appeal ☐ Concluded Number Street Case number ZIP Code Pending Case title Court Name On appeal Concluded Number Street Case number ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. ☐ Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Number Street Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. ZIP Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Number Street Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. City State ZIP Code

Property was attached, seized, or levied.

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	TATYANA	HOPKINS		Case number (if known)		
	First Name	Middle Name	Last Name	<u></u>		······································
		en. 10. 1				
			ankruptcy, did any creditor, includir nt because you owed a debt?	ig a bank or financial instituti	on, set off any an	nounts from yo
N		to make a payme.	ac because you owen a descr			
	o es. Fill in the de	staile				
	es. i ili lii lile qe	talis.				
			Describe the action the credito	r took	Date action	Amount
Čr	editor's Name		mass man market and market and market		was taken	
٠.						
No	umber Street				-	\$
_						
Ĉit	ty	State ZIP C	ode Last 4 digits of account numb	er: XXXX		
			kruptcy, was any of your property is	n the possession of an assigi	nee for the benefi	t of
		ppointed receiver,	a custodian, or another official?			
No						
Ye	es					
5:	List Certai	n Gifts and Con	tributions			
thir	n 2 vears befoi	e vou filed for bar	nkruptcy, did you give any gifts with	a total value of more than \$6	600 per person?	
No		•		•		
		tails for each gift.				
46	es. Fill in the de	talls for each gift.				
c	Cifte with a total	value of more than \$	600 Describe the gifts		Dates you gave	Value
	per person	value of more chair q	Describe the since		the gifts	value
						¢
Pe	rson to Whom You	Save the Gift	***************************************			Ψ
						•
						Ψ
Nico	mber Street		-			
(VL)	mber Street					
75	**************************************	State ZIP Co	mananan.			
City	у	State ZIP Co	ue			
Pe	erson's relationshi	p to you				
				• • • • •		
		alue of more than \$6	00 Describe the gifts		Dates you gave	Value
pe	er person				the gifts	
Per	rson to Whom You (Save the Gift			termination for the state of th	\$
	·		water-district districts			\$
NI.						
INLE	mhar Cim-i					
	mber Street					
						
City		State ZIP Co	ode .			
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tAT t	YANA HOPKINS	Case number (if known)	•	
First N	iame Middle Name	Last Name		
thin 2 yea	rs before you filed for ba	inkruptcy, did you give any gifts or contributions with a total va	lue of more than \$6	00 to any charity?
No				
	n the details for each gift of	or contribution.		
			:	
	contributions to charities I more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Na	me			\$
·				
			***************************************	\$
Number S	Street	offenda discounts		
City	State ZiP Code			
City	State ZIP Code			

Lis	t Certain Losses			
				
	the property you lost and loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your loss	Value of property lost
		claims on line 33 of Schedule A/B: Property.	•	
			:	\$
				Ψ
	Cartain Danmanta an	**************************************		
A LIST	Certain Payments or	i ransters		
		kruptcy, did you or anyone else acting on your behalf pay or tra	ansfer any property	to anyone
		ptcy or preparing a bankruptcy petition?	wour bankerentor	
-	morneys, bankruptcy penn	on preparers, or credit counseling agencies for services required in	your pankrupicy.	
No				
Yes. Fill in	n the details.		. •	
		Description and value of any property transferred	Date payment or	Amount of paymen
Person Wh	o Was Paid	ANTANANANANANANANANANANANANANANANANANAN	transfer was made	
Number	Street			\$
				\$
City	State ZIP Co	da		
City	State ZIP CO	MG.		
Email or we	ebsite address			
or the				
Person Wh	o Made the Payment, if Not You	**************************************		

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TATYANA HOPKINS Debtor 1 Case number (# known) Description and value of any property transferred Date payment or Amount of transfer was made payment Person Who Was Paid Number Street State ZIP Code Fmail or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ☑ No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was Person Who Was Paid Number Street ZiP Code State 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. M No Yes. Fill in the details. Description and value of property Describe any property or payments received Date transfer transferred or debts paid in exchange was made Person Who Received Transfer Number Street City 7IP Code State Person's relationship to you ___ Person Who Received Transfer Number Street

Person's relationship to you ____

ZIP Code

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tain Financial Accordore you filed for bank oved, or transferred?		Boxes, and Storag r instruments held in	• Units your name, or for your	Date transfer was made
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tain Financial Acco efore you filed for bank oved, or transferred? g, savings, money man es, pension funds, coo ne details.	unts, instruments, Safe Deposit ruptcy, were any financial accounts o ket, or other financial accounts; cert peratives, associations, and other fir	Boxes, and Storag r instruments held in ficates of deposit; sha ancial institutions.	e Units your name, or for your	was made
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efore you filed for bank oved, or transferred? g, savings, money man es, pension funds, coo ne details.	unts, Instruments, Safe Deposit ruptcy, were any financial accounts o ket, or other financial accounts; certi operatives, associations, and other fir	Boxes, and Storag r instruments held in ficates of deposit; sha ancial institutions. Type of account or	e Units your name, or for your	benefit,
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efore you filed for bank oved, or transferred? g, savings, money man es, pension funds, coo ne details.	unts, Instruments, Safe Deposit ruptcy, were any financial accounts o ket, or other financial accounts; certi operatives, associations, and other fir	Boxes, and Storag r instruments held in ficates of deposit; sha ancial institutions. Type of account or	e Units your name, or for your	benefit,
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efore you filed for bank oved, or transferred? g, savings, money man es, pension funds, coo ne details.	ruptcy, were any financial accounts on the financial accounts; certiperatives, associations, and other fire	r instruments held in ficates of deposit; sha ancial institutions.	your name, or for your	
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es, pension funds, coone details.	peratives, associations, and other fir	ancial institutions. Type of account or	, , , , , , , , , , , , , , , , , , , ,	,
cial Institution	Last 4 digits of account number			
cial Institution	Last 4 digits of account number			
	Last 4 digits of account number			
		msu unient	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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et	XXXX	Checking		\$
		Savings		
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State ZiP Cod				
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22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for	
Name of Storage Facility Name Number Street Number Street City State ZIP Code City State ZIP Code 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, at or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the contents Number Street Number Street Number Street Number Street City State ZIP Code	bankruptcy?
Number Street City State ZIP Code City State ZIP Code Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, at or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the property Owner's Name Number Street City State ZIP Code	s Do you still have it?
City State ZIP Code City State ZIP Code	☐ No ☐ Yes
Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, at or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the property Owner's Name Number Street City State ZIP Code	
Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, at or hold in trust for someone. No	
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, at or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the property Owner's Name Number Street City State ZIP Code City State ZIP Code	
or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the property Owner's Name Number Street City State ZIP Code City State ZIP Code	
Ves. Fill in the details. Where is the property? Describe the property Owner's Name Number Street City State ZIP Code City State ZIP Code	re storing for,
Owner's Name Number Street City State ZIP Code Where is the property? Describe the property City State ZIP Code	
Owner's Name Number Street Number Street City State ZIP Code	
Number Street Number Street City State ZIP Code City State ZIP Code	y Value
Number Street City State ZIP Code City State ZIP Code	\$
City State ZIP Code	
City State ZIP Code	
Part 10: Give Details About Environmental Information	
For the purpose of Part 10, the following definitions apply:	
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamina hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or cincluding statutes or regulations controlling the cleanup of these substances, wastes, or material.	
Site means any location, facility, or property as defined under any environmental law, whether you now ow utilize it or used to own, operate, or utilize it, including disposal sites.	wn, operate, or
Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, hazardous material, pollutant, contaminant, or similar term.	tance, toxic
Report all notices, releases, and proceedings that you know about, regardless of when they occurred.	
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of a	an environmental law?
☑ No ☑ Yes. Fill in the details.	
Governmental unit Environmental law, if you know it	it Date of notice
Name of site Governmental unit	which have been considered to the constraint of
Number Street Number Street	
City State ZIP Code	

City

State

ZIP Code

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First Name			Case number (it known)	
	Middle Name	Lust Name		
ve you notified a	ny governmenta	l unit of any release of hazardous n	naterial?	
No				
Yes. Fill in the d	details.			
		Governmental unit	Environmental law, if you know it	Date of notice
Name of site		Governmental unit		
ARINE OF SILE		Governmental unit		
Number Street		Number Street		
		City State ZIP Co	ode	
City	State ZIP	Code		
_	rty in any judicia	al or administrative proceeding und	ler any environmental law? Include settle	ements and orders.
No				
Yes. Fill in the d	letails.			01-1 11
		Court or agency	Nature of the case	Status of the case
Case title				F73
		Court Name		☐ Pending
				On appe
		Number Street		☐ Conclude
Case number				
Case Homber		City State	ZIP Code	
		ur Business or Connections to		
hin 4 years befo	re you filed for b	iankrupicy, did you own a business		is io any business r
A sole propr A member of A partner in	rietor or self-emp of a limited liabilit a partnership	ty company (LLC) or limited liability	ner activity, either full-time or part-time	is to any pusiness?
A sole propr A member of A partner in	rietor or self-emp of a limited liabilit a partnership	ployed in a trade, profession, or oth	ner activity, either full-time or part-time	is to any business (
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☐ A sole propr☐ A member of☐ A partner in☐ An officer, d☐ An owner of☐ No. None of the☐	rietor or self-emp of a limited liability a partnership lirector, or manage of at least 5% of the above applies.	oloyed in a trade, profession, or other ty company (LLC) or limited liability ging executive of a corporation ne voting or equity securities of a corporation to to Part 12.	ner activity, either full-time or part-time y partnership (LLP) orporation	is to any business (
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☐ A sole propr☐ A member of☐ A partner in☐ An officer, d☐ An owner of☐ No. None of the☐ Yes. Check all the ☐ An owner of☐ An owner of ☐ ☐ An owner of ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	rietor or self-emp of a limited liability a partnership lirector, or manage of at least 5% of the above applies.	oloyed in a trade, profession, or other ty company (LLC) or limited liability ging executive of a corporation ne voting or equity securities of a corporation of the Part 12. and fill in the details below for each posseribe the nature of the book of the profession	ner activity, either full-time or part-time y partnership (LLP) orporation h business. usiness Employer Identifi Do not include So	cation number ocial Security number or ITIN.
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		Last Name	Case number (# known)		
Business N	Name	Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN	
Number S	Street	Name of accountant or bookkeeper		Dates business existed	
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